



DIVISION OF DRIVER LICENSING

RELIGIOUS EXEMPTION AFFIDAVIT

I, _____ residing at _____
NAME RESIDENCE

With date of birth of _____ do so solemnly swear or affirm that I (*choose one of the following*):
Month/Day/Year

- ☐ Based upon personally-held religious convictions refuse to divulge my Social Security Number;
- ☐ Based upon personally-held religious convictions refuse to not have nor possess a Social Security Number;

Affiant further sayeth naught.

SIGNATURE (*applicant*)

COMMONWEALTH OF KENTUCKY

County of _____ Signed and sworn before me (*date*)

NOTARY PUBLIC

MY COMMISSION EXPIRES (*date*)
